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maintenance fee notificat		otherwise in Block 1, 03 (a) speetlying a new control			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block! for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
32294	7590 09	/29/2009			_	mission	
SQUIRE, SANDERS & DEMPSEY L.L.P. 8000 TOWERS CRESCENT DRIVE 14TH FLOOR				Certificate of Mailing or Transmission 1 hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
VIENNA, VA 2	2182-6212					(Depositor's name)	
						(Signature)	
						(Date)	
APPLICATION NO. FILING DATE		re l	FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/632,835 08/04/2003		Shlomo Shachar	hachar 058300,00006 9248				
TITLE OF INVENTION: ENHANCED RESERVATION BASED MEDIA ACCESS CONTROL FOR DYNAMIC NETWORKS AND SWITCH-FABRICS							
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	E FEE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$755	\$300	\$0	\$1055	12/29/2009	
EXAMINER ART U		ART UNIT	CLASS-SUBCLASS	J			
LEE, CHI HO A		2416	370-458000				
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) MATISSE NETWORKS, INC. 339 N. BERNARDO AVENUE, STE.110 MOUNTAIN VIEW, CA 94043 Please check the appropriate assignee category or categories (will not be printed on the patent): Individual XX Corporation or other private group entity Government							
4a. The following fec(s) are submitted: Solution Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies 10			 b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. XXPayment by credit card. Form PTO-2038 is attached. XXI'ne Director is hereby authorized to charge the required fec(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-2222 (enclose an extra copy of this form). 				
	s SMALL ENTITY s	atus. See 37 CFR 1.27.			LL ENTITY status. See 37 C		
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